

PROFILE

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Florida Plan unit helps put Lee County man behind bars for insurance fraud



Internal Audit's fraud investigation unit: (l-r) Nancy Bradford, Linda Dunbar, Dot Griggs and Robert Bunch show where crime can lead. Absent is Cindy Lemon.

A "greedy" 47-year-old former chiropractor recently was sentenced to 103 years in prison for insurance fraud, mail fraud, racketeering, obstruction of justice and perjury.

He was convicted on all 25 counts of the charges largely due to efforts by Health Care Audit, Medicare Part B Program Integrity, and the fraud investigation unit of Internal Audit.

Fraud "Hot Line"

1-800-635-2369

The unit was created five years ago, their function having expanded since they began auditing claims in 1978. Not really looking for fraud that year, they examined seven cases that produced six convictions and \$44,000 in recovered funds for the company.

The unit has saved the corporation about \$675,000 last year, and they're setting a performance record this year.

With their combined experience, the four staff members are well prepared to uncover crime, with backgrounds in accounting, law enforcement and claims examining.

Thus far in 1988, they have investigated more than 240 cases of possible fraud and recovered more than \$500,000. An additional 24 cases and \$235,000 of potential recoveries are awaiting action by law enforcement authorities.

Monetary recoveries come in three forms: restitution from people who've defrauded the company, request refunds (overpayments to providers), and cost avoidance (blocked claim payments).

Eager to put criminals out of business, fraud investigators also must have patience. The investigation and prosecu-

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Fraud fueled family fortune, for a while . . .

When William Mayers lost his chiropractic license in 1984, he hired other chiropractors and physicians to work in his North Fort Myers clinic, which he operated with his wife and son.

The employee doctors apparently were unaware — most of them didn't speak English well — that he filed automated claims for services they didn't perform.

Mayers billed about \$250,000 for a doctor who was employed there only three months. He billed for another doctor's services long after the doctor had left the clinic.

Subscribers complained to the fraud unit about receiving Explanation of Benefits (EOB) forms from BCBSF when they hadn't been treated.

An on-site review of patient records by Sue Lucidi of Health Care Audit confirmed that the claims were false.

The payouts were substantial, as Mayers often billed as much as \$35,000 for a single family. He claimed that his clinic treated 1,500 patients every week.

Mayers continued his criminal enterprise even after BCBSF removed the terminal he'd used to file claims. That's when he began listing the clinic's address on each

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"Other cards may bring you status; ours bring you peace of mind." — HOSF returns to TV

After almost a two-year absence from television, BCBSF recently broadcasted its HMO message to South Floridians.

A 30-second commercial called "Members" was part of an advertising campaign to increase Health Options of South Florida enrollment in Broward, Dade and Palm Beach counties.

The campaign was designed to generate enrollment leads and to increase awareness of HOSF, which has lost several large groups in recent months while competitors advertised on TV.

The TV and radio campaign began October 25 and ended November 20. It

was created for general consumers and for specific audiences such as employers and employees.

The ads convey the importance of belonging to the only HMO backed by Blue Cross and Blue Shield of Florida, and the importance of having peace of mind when it comes to health care.

Related direct mail and print advertising present key selling points and information about benefits and enrollment.

They also portray a humorous aspect of credit card acceptance — a restaurant waiter offers a HEALTH OPTIONS card on a tray and says, "With this card you'll be instantly accepted at some of the

most important places in South Florida."

The TV ads employed an emotional strategy showing children as members, with the message, "Other cards may bring you status; ours brings you peace of mind."

Pre-campaign research confirmed HOSF management's belief that awareness of HOSF was low. Post-advertising research and lead tracking will determine the campaign's impact.

The campaign was developed by the Advertising Department in Public Affairs, and by BCBSF's advertising agency, Husk Jennings Overman.

Personal service makes a difference

Correct but also prompt

Robbie Armstrong and **Shirley McKinney**, Customer Service Representatives in FEP Correspondence, earned letters of praise from subscribers who appreciated not only their helpful information, but also their promptness in replying.

"Big factor in renewal"

Judith Mogle of N & M Heating & Cooling in Sarasota wrote to praise **Carolyn Chatham** (Group Account Specialist, Membership and Billing) for being "courteous, helpful and very trustworthy," which "will certainly be a big factor when we make the decision to renew with your company again next year."

Smooth operator

Jeanne Pellegrino of Orange Park wrote about the "outstanding job" done by **Catherine Perry** (Customer Service Representative, Telephone Information). "It is a pleasure to see a competent, caring person . . . Hire more people like Ms. Perry and your operations would run very smoothly!" she stated.

Cash returned

Grateful for kind treatment she received from **Marilyn Woods** (Telemarketing



Catherine Perry (above, l-r) and Marilyn Woods, Robbie Armstrong (below) and Shirley McKinney enjoy helping people.



Sales Representative), Ethel Schwartz of Miami Beach mailed her a check for \$35. A simple "thank you" would have sufficed, so her check was returned.

Ruder named to "Who's Who"

Bruce Ruder, marketing director for HEALTH OPTIONS West Coast, is listed in the 1988-89 edition of "Who's Who."

A Wisconsin native who has served BCBSF for two years, Ruder spent six years with Blue Cross of Indiana and 2 ½ years with Blue Shield of Wisconsin.

Before serving as marketing vice president for a hospital management company in Alabama, he helped develop two HMOs in Wisconsin, one of which was the nation's first rural Individual Practice Association.

Aberly honored for voluntarism

Bill Aberly of Engineering and Building Services was named first runner-up for Volunteer of the Year by the Jacksonville Community Posse, a volunteer crime prevention unit of the Jacksonville Sheriff's Office.

Aberly was honored by Attorney General Bob Butterworth for exemplary contributions to crime prevention during the 14th annual Crime Prevention Conference in Jacksonville.

Quality customer service is a goal in Medicare Part B Telephones — “the only place to be”



Three of the outstanding customer service representatives in Medicare Part B Telecommunications: Jean Jordan, James Florit and Robin King.

Helping people understand their health insurance can be a rewarding experience. It's also a basis for BCBSFs reputation as a corporation that cares about people.

In Medicare Part B Telecommunications, where most customers are elderly, helpfulness is a way of life, as related by three customer service representatives:

“They're old and they can't get out, so they rely on us for their needs,” Jean Jordan said.

“We might be the only person they ever talk to (about their coverage),” so it's important to answer beneficiaries' questions right, the first time, or to know where to find the answers.

Robin King agreed. “Being a customer service representative, you're the ‘front line.’ You have to know all about the Medicare program, (because) they can tell right away if you don't know what you're talking about.”

Callers are sometimes angry, which presents a challenge.

“We try to calm them down and increase their understanding of a situation,” James Florit said.

“The biggest satisfaction is that, by the end of the conversation, they're not mad anymore, even if you haven't been able to help them,” King said.

Some days are busier than others for the department. It depends upon the season and the day of the week, Mana-

ger Karen Tingen said.

The telephones are most active during the coldest months, January through April, when scores of “snowbirds” flock to Florida. On any given day throughout the year, the volume can be from 6,000 incoming calls to 10,000 or more per day, with Mondays having the heaviest load, Tingen said.

With that many calls, how do people give good service?

“Although you have a production quota, you have to take more time with some people,” Florit said.

King remarked, “You can't really put a time limit on customer service.”

Besides, Jordan added, “It's a lot easier to do it right the first time,” because people will just call again and talk with someone else (to get answers).

“It may pay to take longer on the phone to answer more questions,” Tingen said, noting that phone calls are worthless without quality.

Jordan observed that Medicare Part B's management wants quality service, “and they're willing to do whatever it takes to deliver it.”

Tingen spoke of “a conscious decision by management” to provide excellent customer service. One result of their determination has been the hiring of additional staff members, she said.

On the busiest days, especially, the department still strives to meet quotas,

but there's a major emphasis on quality every day, Tingen said.

Jordan mentioned that employees sometimes have to research a subject and call people back. “You owe them that courtesy, to call and let them know, ‘I'm still working on it. I still care.’”

“You have to empathize with them. I try to treat a person the way I like to be treated myself,” she said.

Being a customer service representative in their department requires skills that come with experience, including knowledge of claims examining, written correspondence and legal requirements, Robin said.

In the department's provider unit, she and 16 others are involved with interpretations of law, billing procedures, and educating doctors' new employees. Seven other units serve beneficiaries, but they also interact with spouses, relatives, advisory councils that help beneficiaries file claims, the Social Security Administration, and sometimes doctors, when their patients are present.

One of the best things about their work is that they receive “instant gratification” for their efforts, Florit said.

“It's the only job to have,” King said, citing the experience and fulfillment it offers. “It's the only place to be.”

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Frank Dorman, Editor
Printing, Corporate Print Shop

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Fraud unit

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tion of a provider can take up to four or five years, said Nancy Bradford, manager of Internal Audit.

1988 will be a record year for the unit, she said, because more people are aware that the unit exists, and subscribers are more aware of what BCBSF pays and what they pay.

Call ext. 6548 for a fraud presentation in your department.

"People seem to care more about fraud now," Bradford said, noting that most investigations begin when people call the toll-free fraud "hot line." "People tell you where the fraud is," she said.

More than 3,500 calls have been received through September this year.

Tips also come from BCBSF employees who notice peculiar claim filings, such as numerous claims origina-

ting from the same address, as in the case of the former chiropractor. (See sidebar story)

The unit conducts "focused investigations" of such things as pharmacists' claim records, the company's claims system, payments to employees who have unusually high utilization, and subscribers who inquire too often about claims.

Most subscribers call honestly to learn the status of claims they've filed. But some people who file false claims call attention to themselves by making too many inquiries, Bradford said.

For example, a review of customer inquiries revealed a 57-year-old Sarasota woman who called BCBSF often to complain that payments were late. Having received more than \$9,000 worth of claim payments during the past three years, she recently was charged with insurance fraud and grand theft.

The health insurance industry estimates that 3 to 15 percent of claims payouts are fraud-related. Most of them involve providers.

An example is Dr. Sanford Levin of Miami, a former PPC physician who billed BCBSF for allergy tests that were

not performed. The fraud unit discovered this by contacting labs he used.

The Florida Department of Professional Regulation made him pay restitution and a \$5,000 fine, gave him a six-month suspension and five years' probation, and assigned him 100 hours of community service.

Family fraud

(Continued from page 1)

claim, so that EOB forms would be mailed to the clinic instead of to patients' homes.

Mayers did this even though he already had lost his license and the federal government had fined him \$1.8 million. Also, he knew that BCBSF's fraud unit was investigating his operation.

"He was greedy," said Nancy Bradford, manager of Internal Audit.

Now, Mayers and his family have time to reflect on their past. Patricia, 45, faces a 78-year prison term, and Matthew, 21, has a 42-year sentence.

Volunteers register more than 300 voters

This year, more than 300 BCBSF employees registered to vote without having to visit the Supervisor of Elections office.

They registered at work, thanks to fellow employees who volunteered to

become deputy registrars.

Coordinated by Jacqueline Johns of the Governmental and Legislative Relations unit of Public Affairs, the volunteers conduct registration drives and update voter cards.

More than 1,600 employees have registered since the program began in 1984.

Volunteers not pictured at left are Durward Allen, Stell Bennefield, Horace Fisher, Suellen Holder, Sandra Jackson, Laura Jones, Denise Johnson, Mike Lieble, Dena Luke, Jacqueline McKenzie, Elaine Riegler, Steven Smith, Susan Waltrip and Jane Wytzka.



Some of BCBSF's deputy voter registrars are (l-r) Nancy Holton, Valerie Smith, Anna Guy, June Dowdell, Jacqueline Johns, Sandra Reber, Carol Gustafson and Richard Johnson.

Riegler speaks on SIR panel

Elaine Riegler, manager of Competitor Analysis and Market Performance, joined a panel discussion November 9-11 during the Society of Insurance Research (SIR) annual conference in Detroit.

Their subject was how to collect and analyze data about competitors in the health care marketplace.